| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | *Phr* | C7814 | 4/28/00 |
| O.I.P.E. CLASSIFIER | | | 5-3-00 |
| FORMALITY REVIEW | *H* | 60135 | 6/29/00 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ | ..................................... Rejected | N | ................................. Non-elected |
| = | ..................................... Allowed | I | ................................. Interference |
| — | (Through numeral)... Canceled | A | ................................. Appeal |
| ÷ | ..................................... Restricted | O | ................................. Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

**BEST AVAILABLE COPY**